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CONFIRMATION NO. 3833

Bib Data Sheet

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| SERIAL NUMBER 10/690,430 | FILING OR 371(c) DATE 10/21/2003 RULE | CLASS 623 | GROUP ART UNIT 3738 | ATTORNEY DOCKET NO. 104558-200 |
| APPLICANTS Brett Allison Taylor, Clayton, MO; | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/419,556 10/21/2002 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/20/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged | | STATE OR COUNTRY MO | SHEETS DRAWING 13 | TOTAL CLAIMS 43 |
| Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 5 | | |
| ADDRESS 28765 | | | | |
| TITLE INTERVERTEBRAL DISK PROSTHESIS | | | | |
| FILING FEE RECEIVED 1068 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |